

ASCENSION LUTHERAN CHURCH
842 N. Tyler Rd.
Wichita, Kansas 67212
316-722-4694

2023 Building Use Application

We, the undersigned, request use of a room (designated below) for our activity. The preferred day of week and time of day are indicated. Group representative must be at least 18 years of age or older.

Group _____

Group Representative _____

Home/Cell Telephone # _____ Work Telephone # _____

SIZE OF GROUP _____ ROOM REQUESTED _____ Email Address _____

DESCRIPTION _____

DAY(S) OF WEEK REQUESTED _____ EVENT START/END _____

ACCESS TIME, IF APPLICABLE _____

FREQUENCY OF USE: Weekly Bi-Weekly Monthly (1st, 2nd, 3rd, 4th, 5th) Please make selection(s).

DATES REQUESTED (beginning) _____ (ending) _____

- *Applications will be evaluated on the basis of priority established in our "Facility Usage Policy" and on the basis of date of application.*
- *A \$100.00 application fee will be returned if your request is denied, or applied to your utility use charge if approved for the PAC. No fee is necessary for church groups or non-profit organizations, unless it is for their sporting teams.*
- *Submitting this application indicates that you have read the accompanying material and agree to abide by both the regulations and cost structure.*
- *Provide us a schedule of your activities. When you communicate with your group to meet/cancel/change, please provide Ascension Lutheran Church the same courtesy. Let us know as well, especially at holiday times and end of school year times, etc. Don't let lack of planning on YOUR PART, be an urgency on our part. Communicate!!!*

Enclosure: Facility Usage Policy- Do not return: This is your personal copy.

Date and Time of Receipt in Office: _____

SIGNATURE of GROUP REPRESENTATIVE

ADDRESS OF GROUP REPRESENTATIVE:

For Office Staff Use Only:

Keys/Code issued: YES NO

Key _____ Code _____